

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	JL		
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		67534	2/16/01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	2/16/01
2	2/16/01
3	2/16/01
4	2/16/01
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Claim	Date
Final	
Original	
51	2/16/01
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100	2/16/01

Claim	Date
Final	
Original	
101	2/16/01
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149	2/16/01
150	2/16/01

BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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